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Electronic Filing System (EFS) Data
Electronic Patent Application Submission
USPTO Use Only

EFS ID: 46849
Application ID: 09709035
Title of Invention: SYSTEMS AND METHODS FOR
TISSUE ABLATION AND
RESECTION
First Named Inventor: Jean Woloszko
Domestic/Foreign Application: Domestic Application
Filing Date: 2000-11-08
Effective Receipt Date: 2003-08-29
Submission Type: Information Disclosure
Statement
Filing Type:
Confirmation number: 2565
Attorney Docket Number: A14
Total Fees Authorized: 180.0
Payment Category: Deposit Account
Deposit Account Number: 500359
Deposit Account Name: Richard R Batt
Access Code: ****
RAM Payment Status: RAM success
RAM User ID: EFSPROD
RAM Accounting Date: 2003-08-29
RAM Sequence Number: 7

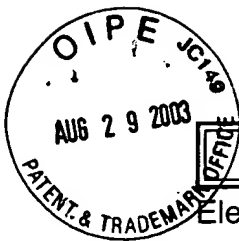


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Digital Certificate Holder: cn=John Thomas Raffle,ou=Registered Attorneys,ou=Patent and
Trademark Office,ou=Department of Commerce,o=U.S. Government,c=US
Certificate Message Digest: 4a9ba8a9c2cc65ff57f8fd7af721088b92fabacc




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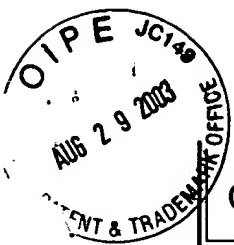
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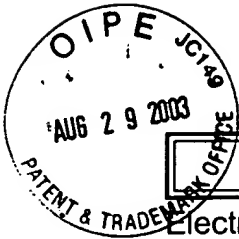
Stylesheet Version v1.1.0

Title of Invention	SYSTEMS AND METHODS FOR TISSUE ABLATION AND RESECTION																		
<table border="0"><tr><td>Application Number:</td><td>09/709035</td><td></td><td rowspan="4">RECEIVED SEP 05 2003 TECHNOLOGY CENTER R3700</td></tr><tr><td>Date:</td><td>2000-11-08</td><td></td></tr><tr><td>First Named Applicant:</td><td>Jean Woloszko</td><td></td></tr><tr><td>Confirmation Number:</td><td>2565</td><td></td></tr><tr><td colspan="2">Attorney Docket Number:</td><td colspan="2">A14</td></tr></table>			Application Number:	09/709035		RECEIVED SEP 05 2003 TECHNOLOGY CENTER R3700	Date:	2000-11-08		First Named Applicant:	Jean Woloszko		Confirmation Number:	2565		Attorney Docket Number:		A14	
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<p>I hereby certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.</p> <p>I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.</p> <table border="1"><thead><tr><th>Submitted by:</th><th>Elec. Sign.</th><th>Sign. Capacity</th></tr></thead><tbody><tr><td>Richard R Batt Registered Number: 43485</td><td>RRB</td><td>Attorney</td></tr></tbody></table>				Submitted by:	Elec. Sign.	Sign. Capacity	Richard R Batt Registered Number: 43485	RRB	Attorney										
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<table border="0"><tr><td>Documents being submitted</td><td>Files</td></tr><tr><td>us-fee-sheet</td><td>A-14SuppIDS-usfees.xml</td></tr><tr><td></td><td>us-fee-sheet.xml</td></tr><tr><td></td><td>us-fee-sheet.dtd</td></tr><tr><td>us-ids</td><td>A-14SuppIDS-usidst.xml</td></tr><tr><td></td><td>us-ids.dtd</td></tr><tr><td></td><td>us-ids.xml</td></tr></table>				Documents being submitted	Files	us-fee-sheet	A-14SuppIDS-usfees.xml		us-fee-sheet.xml		us-fee-sheet.dtd	us-ids	A-14SuppIDS-usidst.xml		us-ids.dtd		us-ids.xml		
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Comments

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Art Unit: 3739											
Examiner: Lee S Cohen											
TOTAL FEE AUTHORIZED \$180											
Patent fees are subject to annual revisions on or about October 1st of each year.											
BASIC FILING FEE											
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Submission Of Information Disclosure Stmt Fee</td><td>1806</td><td>180</td><td>180</td></tr></tbody></table>				Fee Description	Fee Code	Amount \$	Fee Paid \$	Submission Of Information Disclosure Stmt Fee	1806	180	180
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Submission Of Information Disclosure Stmt Fee	1806	180	180								
AUTHORIZED BILLING INFORMATION											
The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:											
Deposit account number: 500359											
Access Code ****											
Deposit name: ArthroCare Corporation											
Deposit authorized name: Richard R Batt											
Signature: RRB											
Date (YYYYMMDD): 2003-08-29											